Fill in this inform	nation to identify your case:	
Debtor 1	Ishop A Jeter	_
Debtor 2 (Spouse, if filing)		_
United States B	ankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
Case number (If known)	19-10390-MDC	Check if this is:
		■ An amended filing □ A supplement showing postpetition chapter 13 income as of the following date:
Official F	orm 106l	MM / DD/ YYYY

Schedule I: Your Income

12/15

For Debtor 2 or

For Debtor 1

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Describe Employment								
1.	Fill in your employment information.		Debto	r 1	Debtor 2 or non-filing spouse				
	If you have more than one job,	Empleyment status	■ Em	ployed	■ Employed				
	attach a separate page with information about additional	Employment status	□ No	t employed	☐ Not employed				
	employers.	Occupation	Driver		Insurance Agent				
	Include part-time, seasonal, or self-employed work.	Employer's name	Penn	Warehouse	Willow Grove Agency				
	Occupation may include student or homemaker, if it applies.	Employer's address	2147 S. Columbus Blvd. Philadelphia, PA 19148		1056 Easton Road Willow Grove, PA 19090				
		How long employed the	nere?	April 2015	July 29, 2019				

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,077.53 \$ 4,166.67

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 3,077.53 \$ 4,166.67

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Ishop A Jeter		(Case nun	nber (<i>if kn</i>	own)	19-10	0390-MDC	
		·	-							
					For De	btor 1			Debtor 2 or -filing spouse	
	Cop	y line 4 here	4.		\$	3,077	.53	\$	4.166.6	
	·					-,-			,	
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	629	.63	\$	564.10	6
	5b.	Mandatory contributions for retirement plans	5b		\$.00	\$	0.0	
	5c.	Voluntary contributions for retirement plans	5c	:.	\$	152		\$	0.00	
	5d.	Required repayments of retirement fund loans	5d	١.	\$	0	.00	\$	0.0	0
	5e.	Insurance	5e	٠.	\$	0	.00	\$	0.0	0
	5f.	Domestic support obligations	5f.		\$	0	.00	\$	0.00	0
	5g.	Union dues	5g	ı.	\$	54	.21	\$	0.0	0
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	0	.00	+ \$	0.0	<u>0</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	836	.50	\$	564.10	6
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,241	.03	\$	3,602.5	 1
8.	List	all other income regularly received:						· <u> </u>		<u>-</u>
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total	_		•			•		_
	O.L	monthly net income.	8a		\$	865		\$	290.00	
	8b.	Interest and dividends	8b	١.	\$	0	.00	\$	0.0	<u>U</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce	•		•	_		•		_
	0.1	settlement, and property settlement.	8c		\$.00	\$	0.00	
	8d.	Unemployment compensation	8d		\$.00	\$	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e		\$	U	.00	\$	0.0	<u>U</u>
	OI.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	;							
		Nutrition Assistance Program) or housing subsidies.	8f.		\$	•	00	æ	0.00	0
	9.0	Specify: Pension or retirement income			\$.00	\$	0.00	_
	8g. 8h.	Other monthly income. Specify: 2017 IRS Refund \$4,763	8g 8h		\$.00 .92	э + \$	0.00	
	OII.	Wife's 2017 IRS Refund \$3,625	_ 011	1.∓	\$.00	* \$ *	302.0	
		Wile \$ 2017 IKS Refulid \$3,025	_	_	Ψ	U	.00		302.00	<u> </u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	1,261	.92	\$	592.0	08
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2 5	02.95	+ \$	11	94.59 = \$	7,697.54
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_	3,3	02.93	-	4,1	<u> </u>	7,097.34
		.								
11.	Incl othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe						chedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The res e that amount on the Summary of Schedules and Statistical Summary of Certai								
	app		II LIA	IIII	ues and	Kelaleu	Dala	, 11 11	12. \$	7,697.54
	~PP									
									Comb	
13.	Do.	you expect an increase or decrease within the year after you file this form	?						montr	nly income
		No.	-							
	$\overline{}$	Yes. Explain:								
	_									